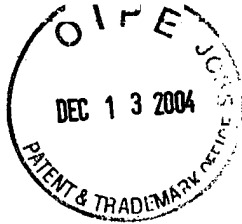


EXCEL.016REC1



12-15-04

12-15-04  
PATENT

Applicant : Frederick J. Kiko  
Appl. No. : 10/748,729  
Filed : December 29, 2003  
For : **IMPEDANCE BLOCKING  
FILTER CIRCUIT**  
Examiner : Tieu, B.  
Group Art Unit: 2643

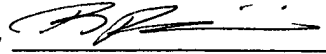


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PATENT, TRADEMARK OFFICE

I hereby certify that this paper together with enclosures is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated below and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450,

Express Mail Label No. EV 398853193 US  
Date of Deposit: Monday, December 13, 2004

By   
Robert F. Gazdzinski  
Reg. No. 39,990

COMMISSIONER FOR PATENTS  
P.O. BOX 1450  
ALEXANDRIA, VA 22313-1450

Sir:

Transmitted herewith in the above-entitled application are the following:

- (X) Amendment and Response to Office Action (20 Pages).
- (X) Appendix I – Redlined Claims (Pages 21-25).
- (X) Applicant hereby requests a ONE-MONTH extension of time in responding to the Patent Office communication mailed August 13, 2004. Enclosed is a check to cover the \$110.00 filing fee for said extension of time.
- (X) Original Patent Grant for U.S. Patent No. US 6,212,259 issued April 3, 2001 in fifteen (15) sheets, including specification, abstract, seventeen (17) claims and nine (9) sheets of drawings.
- (X) Written Consent by Assignee for Reissue (2 Pages).
- (X) Establishment of Right of Assignee and Revocation and Power of Attorney (2 Pages).
- (X) Reissue Continuation Application Supplemental Declaration by the Assignee (2 Pages).
- (X) Reissue Continuation Application Supplemental Declaration by the Inventor (2 Pages).
- (X) Return prepaid postcard.

The fee has been calculated as shown below:

CLAIMS AS FILED						
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
Total Claims	29	MINUS	23	= 6 X	\$ 18	= \$108.00
Independent Claims	6	MINUS	5	= 0 X	\$ 88	= \$88.00
If application has been amended to contain multiple dependent claim(s), then add					\$300	= \$0.00
(Select only one)				one month	\$110	= \$110.00
Time Extension Fees:				two months	\$430	= \$0
				three months	\$980	= \$0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$306.00

- (X) A check in the amount of \$306.00 is enclosed herewith to cover 6 additional claims, 1 additional independent claim, and a one-month extension of time.
- (X) The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 and 1.17 which may be required, or credit any overpayment to Deposit Account No. 501423. A duplicate copy of this sheet is enclosed.

GAZDZINSKI & ASSOCIATES

Dated: 12/13/04

By: 

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